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APPLICANTS

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** CONTINUING DATA *****

None Nm

** FOREIGN APPLICATIONS *****

None Nm

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged	<i>Whale</i> Examiner's Signature	<i>Nm</i> Initials	DRAWING 10	CLAIMS 56	CLAIMS 7

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TITLE

APPARATUS AND AMPLIFIER FOR RECEIVER EQUALIZATION

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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